nd this form, together with applicable fee(s), to: Mail Mail Stop ISSUE F

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

19	137									
INSTRUCTIONS: The appropriation for the indicated units correct maintenance fèc notifica	m should be used to correspondence includired below or directed off tions.	for transmitting the ISSU ng the Patent, advance or nerwise in Block 1, by (a				should be completed where nt correspondence address as parate "FEE ADDRESS" for				
CURRENT CORRESPOND 24998		ock 1 for any change of address)	Fee par	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
	SHAPIRO LLP EET NW	7200	I h Sta ado trai	Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
			Γ			(Depositor's name)				
						(Signature)				
						(Date)				
APPLICATION NO. FILING DATE			FIRST NAMED INVENTO		CONFIRMATION NO.					
10/566,634	08/31/2006		Noriaki Arai	10/29/20	68 A83/19:00817B081943	10566634 7538				
TITLE OF INVENTION	I: SCANNING ELECTR	ON MICROSCOPE		01 FC:15 62 FC:15 03 FC:68	61 64	1510.60 OP 360.00 OP 3.00 OP				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DU	IE DATE DUE				
nonprovisional	NO	\$1440	\$300	\$0	\$1740	10/28/2008				
EXAMINER		ART UNIT	CLASS-SUBCLASS]						
WELLS,	NIKITA	2881	250-310000							
1. Change of correspond CFR 1.363).	ence address or indicatio	n of "Fee Address" (37	2. For printing on the		Dicker	in Shapiro LL				
	oondence address (or Cha B/122) attached.	inge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,							
Tree Address" ind	lication (or "Fee Address 2 or more recent) attach	" Indication form	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	THE PATENT (print or ty	/pe)						
PLEASE NOTE: Un recordation as set fort	less an assignee is ident th in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on the p T a substitute for filing ar	patent. If an assigne assignment.	e is identified below, the	document has been filed for				
(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CIT	Y and STATE OR CO	OUNTRY)					
Hitachi	High-Techno	logies Corpo	oration	Tokyo,	Japan					
Please check the appropr	riate assignce category or	categories (will not be pr	inted on the patent):		-	group entity Government				
4a. The following fee(s)	are submitted:	41	o. Payment of Fee(s): (Ple	ease first reapply any	y previously paid issue fe	e shown above)				
XXIssue Fee			A check is enclosed.							
Publication Fee (N	No small entity discount	permitted)	 Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 04-1073 (enclose an extra copy of this form). 							
XXAdvance Order -	# of Copies		overpayment, to Dep	osit Account Number	the required fee(s), any $0.04 - 10.73$ (enclose	an extra copy of this form).				
	tus (from status indicate					GED 1.25()(2)				
• •	s SMALL ENTITY state				L ENTITY status. See 37	CFR 1.27(g)(2). the assignce or other party in				
interest as shown by the	records of the United Sta	ates Patent and Prademark	Office.	are applicant, a regis		and assigned of other party in				

Date OCTOBER 28, 2008 Authorized Signature

Mark J. Thronson Typed or printed name _

Registration No. 33,082

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it displays a valid OMB control number

Under the Paperwork Reduction	Act of 1995, no person a	re require	ed to respond to a co				OMB control nu					
Effective on 12/08	F	Application Num		0/566,634-Conf. #7538								
	*****			August 31, 2006								
FEE TRANS	ŀ			Noriaki Arai								
For FY 2		7 11 00 11 10 11 11 11 11 11 11 11 11 11		Nikita Wells								
Applicant claims small entity sta	-			2881								
TOTAL AMOUNT OF PAYMENT		7 AL OTH		A8319.0081/P081								
	(\$) 1,813.00	L	Altoniey bocket	140.		3010:000 111 001						
METHOD OF PAYMENT (check all that apply)												
Check X Credit Card Money Order None Other (please identify):												
x Deposit Account Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro LLP												
For the above-identified dep	osit account, the Dire	ector is	hereby authorize	d to: (che	ck all that apply)							
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee												
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION	.10 and 1.17				·							
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES	•										
	ILING FEES		ARCH FEES	EXAMIN	NATION FEES							
Annihadian Tuna	Small Entity	Eac (\$)	Small Entity	Eac (\$)	Small Entity	Fees Pa	aid (\$)					
Application Type Fee (Utility 330		Fee (\$) 540	Fee (\$) 270	Fee (\$) 220	Fee (\$) 110	rees re	314 (4)					
1		100	50	140	70		·····					
		330	165	170	85							
Plant 220												
Reissue 330		540	270	650	325							
Provisional 220), 110	0	0	0	0							
2. EXCESS CLAIM FEES						Fee (\$)	mall Entity Fee (\$)					
Fee Description Each claim over 20 (including Reis					52	26						
Each independent claim over 3 (inc	,				220	110						
Multiple dependent claims						390	195					
Total Claims Extra Clain	ns Fee (\$)	Fe	e Paid (\$)	N	lultiple Depende	ent Claims						
- 20 or HP	× =			Fe	<u>e (\$)</u> <u>F</u>	ee Paid (\$)						
HP = highest number of total claims paid for		_					_					
Indep. Claims Extra Clain	ns Fee (\$) x =	Fe	ee Paid (\$)									
- 3 or HP = HP = highest number of independent claim		3.										
3. APPLICATION SIZE FEE	•											
If the specification and drawings	exceed 100 sheets of	paper ((excluding electr	onically fi	iled sequence or	computer						
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra Sheet			dditional 50 or frag	ction there	of Fee (\$)	Fee P	aid (\$)					
- 100 =						=						
4. OTHER FEE(S)						Fees F	Paid (\$)					
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing surcharge): 1501 Utility issue fee 1,510.00 1504 Publication fee for early, voluntary, or normal 300.00												
8001 Printed copy of patent w/o color 3.00												
SUBMITTED BY / O / /												
Signature ///			Registration No. (Attorney/Agent)	33,082	Telephone	(202) 420	-4742					
Name (Print/Type) Mark J. Thronson Date October 28,												